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Federal Communications Commission
Office of Secretary

Before the
FEDERAL COMMUNICATIONS COMMISSION
WASHINGTON, D.C. 20554

In the Matter of)	
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)	
Second Periodic Review of the)	MB Docket h'o. 03-15
Commission's Rules and Policies)	
Affecting the Conversion)	RM 9832
To Digital Television)	
)	
)	
Public Interest Obligations of TV)	MM Docket No. 99-360
Broadcast Licensees)	
)	
)	
Standardized and Enhanced Disclosure)	MM Docket No. 00-168
Requirements for Television)	
Broadcast Licensee)	
Public Interest Obligations)	

Comments of

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Introduction

In its Notice of Proposed Rulemaking (NPRM) released January 27, 2003 (MB Docket No. 03-15), the Commission seeks comment on a number of issues it considers essential to ensure that the transition to digital television “fully serves the public interest.”¹ In addition, the Commission is now inviting additional comment on its December 1999 Notice of Inquiry (NOT) on Public Interest Obligations of TV Broadcast Licensees (MM Docket No. 99-360), as well as the NPRM issued in September 2000 on Standardized and Enhanced Disclosure Requirements for Television Broadcast Licensee Public Interest Obligations (MM Docket No. 00-168). The Commission noted its goal of bringing the proceedings concerning the public interest obligations of broadcasters in the digital environment “to conclusion promptly.”²

The Kaiser Family Foundation has conducted numerous research studies and analyses that may be relevant to the Commission’s deliberations and may help illuminate the potential impact of the Commission’s decisions on the public health.

Public Interest **Obligations** of Digital Broadcasters

Both Congress and the Commission have affirmed that digital television broadcasters have an obligation to serve the public interest. To date the Commission has stated that “existing public interest requirements continue to apply to all broadcast licensees,”³ and in this NPRM (MB Docket No. 03-15) the Commission asks whether these requirements “should be applied differently or otherwise adapted” for digital licensees, and invites further comment on the previous NOI and NPRM on public interest obligations.⁴

¹ FCC 03-8, p.2

² Ibid.,p.42

³ Ibid.,p.40

⁴ Ibid.

Relevant research

Research has repeatedly indicated that public service announcements (PSAs), one of the ways in which broadcasters can meet their public interest obligations, is an effective means for communicating with the public on health issues. PSAs can raise awareness about critical topics, provide much-needed health information, and even help change attitudes and behaviors. In order to be most effective, PSAs must be strategic in their messaging, and must receive a significant amount of airtime during day parts when the target audience is watching.

In February 2002, the Foundation released a paper titled *The Impact of Public Service Advertising*, by Charles Atkin and Laura Schiller. The paper cited numerous examples of PSA campaigns that had directly impacted public health – from increasing the public’s sense of the importance of AIDS as an issue, to reductions in drunk driving, to reducing teen smoking by as much as 19%.⁵

In internal evaluations the Foundation has conducted of its own **PSA** campaign on sexual health, aired on MTV, surveys indicate that many young people who have seen the ads and called the toll-free telephone number promoted in the spots have taken specific steps to protect their health: 61% said they had spoken with a partner about a sexual health issue as a result of the campaign, 18% said they had been tested for HIV or another STD, 16% said they had visited a doctor or other health provider, and a third of those under 18 said they had spoken with a parent about the issues raised in the campaign.⁶ To date more than a million MTV viewers have called the toll-free number (many millions more have visited the web site).

Research also indicates that only a modest amount of airtime is currently donated to public service announcements. During 2001-2002, the Foundation conducted the largest-

⁵ “The Impact of Public Service Advertising,” by Charles Atkin and Laura Schiller, in *Shouting to be Heard: Public Service Advertising in a New Media Age – Background Papers*, Kaiser Family Foundation, February 2002, p.26

⁶ *MTV Campaign Evaluation: Survey of Callers to the 800 Number*, Kaiser Family Foundation, March 1998

ever independent national content analysis to determine the amount of time being donated by networks and local affiliates to PSAs. The study, *Shouting to be Heard: Public Service Advertising in a New Media Age*, found that television networks and affiliates donate an average of 15 seconds an hour to PSAs, or just under one-half of one percent of all TV airtime.⁷ By contrast, 25% of all airtime is spent on advertising and show promotions.⁸ On the broadcast networks and their affiliates, an average of just 48 minutes a week are donated to public service campaigns.⁹ Forty-three percent of all time donated to PSAs is during the late-night hours between midnight and 6 a.m.; on the major broadcast networks and their affiliates, an average of five seconds an hour is donated to PSAs during prime time.¹⁰ On these broadcast stations, about four in ten spots were 20 seconds or less in length, and one in four (25%) were so-called “PSA-style promos” – spots featuring the networks’ own celebrities rather than spots crafted by public health or other outside organizations.¹¹

Policy options and implications for public health

Current policy does not require licensees to air *any* public service announcements, although it does allow them to include PSAs when listing the actions they have undertaken to serve the public interest.¹² Several policies with regard to public service announcements have been proposed for the Commission to consider, including:

- Establishing a minimum amount of airtime to be donated to public service advertising, such as:
 - a minute an hour;
 - 1% of all airtime; or

⁷ *Shouting to be Heard: Public Service Advertising in a New Media Age – Executive Summary*, Kaiser Family Foundation, November, 2002, p. 5

⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid., p.6

¹¹ Ibid.

¹² “Public Service Advertising, Broadcasters, and the Public Interest: Regulatory Background,” in in *Shouting to be Heard: Public Service Advertising in a New Media Age – Background Papers*, Kaiser Family Foundation, February 2002, p.8

- one prime time minute a night (there are 48 minutes a night of non-programming content during prime time);
- Providing that some portion of these public service announcements be crafted by outside organizations (rather than the PSA-style promos featuring network or station celebrities);
- Ensuring that time is not disproportionately donated to those groups that can afford to buy airtime in exchange for the “free” time they receive;
- Specifying the time of day such donated PSAs can be aired, to ensure they aren’t disproportionately featured during the so-called “graveyard” shift after midnight;
- Setting a minimum number of such donated PSAs that would be at least 30 seconds long; and
- Making the reporting of public interest programming more easily available to the public by posting it on the Internet.

In February 2002, the Foundation convened several hundred representatives of public health organizations in Washington, D.C. for a national conference on the future of public service advertising. Many of these groups rely on donated public service announcements from their local or national broadcasters as a means of communicating with the public. Based on the comments made during the conference, there appeared to be a clear consensus among these groups that they need greater access to the public airwaves to maximize the health benefit they can offer.”

The proposed changes referenced above were all seen as options that would strengthen the ability of non-profit health organizations to have a positive impact on health behavior.

¹³ To view 3 Webcast of the event, go to:
http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=464

The proposed disclosure requirements were highlighted as a good way of helping such organizations find out what campaigns their local stations are currently undertaking, if any. It is unclear whether a standardized form would provide more or less information to groups trying to ascertain what efforts their local stations have undertaken. However, requiring such information to be filed with the FCC would likely serve to heighten its importance.

The V-Chip

The Commission is seeking comment on whether it “needs to do more to ensure that v-chip functionality is available in the digital world” and asks whether it should “specify additional v-chip requirements for digital television receivers.”¹⁴ From the perspective of the public health community, the three key issues are:

- To ensure that blocking technology in television sets can read and respond to the current TV Parental Guidelines Ratings and the motion picture ratings;
- To allow for revisions to the current ratings systems without rendering the v-chips in existing DTVs obsolete; and
- To allow for the development of alternative ratings systems in the future.

Relevant research

Research conducted by the Foundation and others has consistently indicated strong parental support for TV content ratings. For example, in a 2001 survey of parents of children 2-17, 92% of those who had used the TV ratings said they found them useful.¹⁵ Many parents are deeply concerned about the amount of sexual and violent content on television. Sixty-three percent say they are greatly concerned that their children are being

¹⁴ FCC 03-8, pp.45-6

¹⁵ *Parents and the V-Chip 2001: A Kaiser Family Foundation Survey*, Kaiser Family Foundation, July 2001, p. 1.

exposed to too much sexual content on television, while 59% say the same about TV violence.” Scientific research has consistently pointed to possible adverse effects of television violence on young viewers, and many public health organizations have expressed significant concerns.¹⁷ While there have not been any recent studies on the amount of violent content on television, the Foundation’s studies indicate that the amount of sexual content remains high. Indeed, today more than two-thirds of all shows contain **talk** about sex; one third include sexual behaviors; and one in seven shows include characters engaging in sexual intercourse, either depicted or strongly implied.¹⁸

Research has also indicated that many parents do not understand what the current TV ratings mean. For example, only 14% of parents of children 2-6 years old know what the rating “FV” means (fantasy violence) and just 5% of all parents know what the rating “D” means (suggestive dialogue).¹⁹ Likewise, most consumers (53%) are unaware of the fact that their new TV sets include a V-chip; but among those who know they have one, about a third (36%) choose to employ it.²⁰

Policy options and implications for public health

Some have called for revisions to the TV Parental Guidelines so they are more understandable to parents; others have called for the development of a universal ratings system that would apply consistent standards to TV, movies, music, online content, and video games; and still others believe the ratings systems should remain as they are.²¹ Requiring an “open” architecture for the v-chip in digital television would keep all of these options open, allowing for future modifications of the ratings system if that is agreed upon by policymakers and the industry.

“Ibid.. p 2

¹⁷ *Key Facts: TV Violence*, Kaiser Family Foundation, Spring 2003.

¹⁸ *Sex on TV 3: A Biennial Report of the Kaiser Family Foundation - Executive Summary*, Kaiser Family Foundation, February 2003, p. 5

¹⁹ *Parents and the V-Chip 2001*, p.3

²⁰ Ibid., p.1

²¹ Joel Federman, *Rating Sex and Violence in the Media: Media Rulings and Proposals for Reform*, Kaiser Family Foundation, November 2002, p. 11

The goal from the public health perspective would be to leave open the ability to make modifications in the ratings system for digital televisions without rendering previously-sold digital receivers incapable of reading the new system. This could be accomplished either by modifying the existing RRT 01 if and when changes are made, or by putting the new ratings system in RRT 08.* In order to maintain the flexibility to modify the ratings system in the future, or to add new ratings systems, there would need to be compatibility between the signals broadcasters send and the ability of current and future receivers to read and respond to those signals.

Conclusion

Research indicates that public service advertising can help improve the public health. Commission policies that result in more airtime devoted to **PSAs** during high viewing hours are likely to benefit the public health.

Research also indicates possible harmful effects on children from viewing excessive violence in the media. Parents are greatly concerned that their children are being exposed to too much sex and violence on TV, and they strongly support the TV ratings system. Many parents choose to use the V-Chip, but many more are unaware that they have that option, and many others don't understand how the current ratings system works. Commission policies that preserve V-Chip functionality and maximize opportunities for possible reform of the ratings system in the future would be likely to empower parents to help mitigate the possible harmful effects of media on their children.

* If it is the case that there are a substantial number of receivers already in the marketplace that were designed according to a fixed standard, and would be unable to recognize revisions, then the Commission may want to **keep** the **old** rating system intact in RRT 01. If there are only a small number of existing sets with a closed architecture, the Commission may prefer to make any agreed-upon modifications directly in RRT **01**.